

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Abelba</i>		<i>03-10-01</i>
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>[Signature]</i>	<i>1020</i>	<i>04/17/01</i>

*Response*

INDEX OF CLAIMS

- |   |                            |   |                    |
|---|----------------------------|---|--------------------|
| ✓ | ..... Rejected             | N | ..... Non-elected  |
| = | ..... Allowed              | I | ..... Interference |
| - | (Through numeral) Canceled | A | ..... Appeal       |
| ÷ | ..... Restricted           | O | ..... Objected     |

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Best Available Copy

If more than 150 claims or 10 actions  
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*11/20/19*